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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

Declaration Submitted With Initial Filing

OR

Declaration Submitted after Initial Filing (charge (37 CFR 1.16 (e)) required)

Attorney Docket Number	G H L - P002
First Named Inventor	David A. Schleppenbach
COMPLETE IF KNOWN	
Application Number	
Filing Date	
Art Unit	
Examiner Name	

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

COMMUNICATION SYSTEM AND METHODS

(Title of the Invention)

the specification of which

is attached hereto

OR

was filed on (MM/DD/YYYY) 11/15/2004 as United States Application Number or PCT International

Application Number PCT/US2004/038141 and was amended on (MM/DD/YYYY) 05/13/2005 (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES	Certified Copy Attached? NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto.

[Page 1 of 2]

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.
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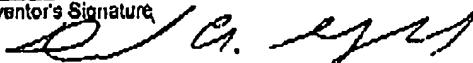
DECLARATION — Utility or Design Patent Application

Direct all correspondence to:		<input type="checkbox"/> The address associated with Customer Number: <input type="text"/>	OR	<input checked="" type="checkbox"/> Correspondence address below
Name KEITH J. SWEDO				
Address ONE INDIANA SQUARE, SUITE 3500				
City INDIANAPOLIS		State INDIANA	ZIP 46204	
Country USA	Telephone 317-713-3446	Email KSWEDO@SOMMERBARNARD.COM		

WARNING:

Petitioner/applicant is cautioned to avoid submitting personal information in documents filed in a patent application that may contribute to identify theft. Personal information such as social security numbers, bank account numbers, or credit card numbers (other than a check or credit card authorization form PTO-2038 submitted for payment purposes) is never required by the USPTO to support a petition or an application. If this type of personal information is included in documents submitted to the USPTO, petitioners/applicants should consider redacting such personal information from the documents before submitting them to the USPTO. Petitioner/applicant is advised that the record of a patent application is available to the public after publication of the application (unless a non-publication request in compliance with 37 CFR 1.213(a) is made in the application) or issuance of a patent. Furthermore, the record from an abandoned application may also be available to the public if the application is referenced in a published application or an issued patent (see 37 CFR 1.14). Checks and credit card authorization forms PTO-2038 submitted for payment purposes are not retained in the application file and therefore are not publicly available.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned Inventor	
Given Name (first and middle (if any)) DAVID A.		Family Name or Surname SCHLEPPENBACH	
Inventor's Signature 		Date 5/11/06	
Residence: City LAFAYETTE	State INDIANA	Country USA	Citizenship USA
Mailing Address 1806 NORTH 15TH			
City LAFAYETTE	State INDIANA	Zip 47904	Country USA
<input checked="" type="checkbox"/> Additional inventors or a legal representative are being named on the <u>1</u> supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.			

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DECLARATION

ADDITIONAL INVENTOR(S)

Supplemental Sheet

Page 1 of 1

Name of Additional Inventor, if any:	<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle if any)	Family Name or Surname		
JOE P.	SAID		
Inventor's Signature	JP		
WEST LAFAYETTE Residence City	INDIANA State	USA Country	CANADA Citizenship
5200 NORTH 78 EAST			
Mailing Address			
WEST LAFAYETTE City	INDIANA State	47906 Zip	USA Country
Name of Additional Inventor, if any:	<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle if any)	Family Name or Surname		
ABRAHAM	HEMETH		
Inventor's Signature	AB J. Abraham Hemeth		
SOUTHFIELD Residence City	MICHIGAN State	USA Country	USA Citizenship
44111 CMC CENTER DRIVE #409			
Mailing Address			
COUNTRY City	Michigan State	48076 Zip	USA Country
Name of Additional Inventor, if any:	<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle if any)	Family Name or Surname		
Inventor's Signature			
Residence City	State	Country	Citizenship
Mailing Address			
City	State	Zip	Country

This declaration of inventorship is being filed with the U.S. Patent and Trademark Office (USPTO) to prosecute and to complete, including any continuations or divisions, the application for the above-named invention. Any comments on the new or revised application should be sent to the USPTO, Attention: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FAXES OR COMPLETED FORMS TO THIS ADDRESS. DO FAX TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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**POWER OF ATTORNEY
and
CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number	PCT/US04/38141
Filing Date	Nov. 15, 2004
First Named Inventor	Schleppenbach
Title	Communication System and Methods
Art Unit	
Examiner Name	
Attorney Docket Number	GHL-POOZ

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

 Practitioners associated with the Customer Number:

OR

 Practitioner(s) named below:

Name	Registration Number
Keith J. Swedo	43,176

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

 The address associated with the above-mentioned Customer Number:

OR

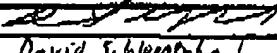
 The address associated with Customer Number:

OR

<input checked="" type="checkbox"/> Firm or Individual Name	Sommer Barnard PC			
Address	One Indiana Square, Suite 3500			
City	Indianapolis	State	Indiana	Zip
Country	46204			
Telephone	317-713-3440	Email	kswedo@sommerbarnard.com	

I am the:

 Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/95)**SIGNATURE of Applicant or Assignee of Record**

Signature		Date	5/11/05
Name	David Schleppenbach	Telephone	
Title and Company			

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

 Total of 4 forms are submitted.

This collection of information is required by 37 CFR 1.31, 1.32 and 1.34. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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**POWER OF ATTORNEY
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INDICATION FORM**

Application Number	PCT/US04/38141
Filing Date	Nov. 15, 2004
First Named Inventor	Schleppenbach
Title	Communication System and Methods
Art Unit	
Examiner Name	
Attorney Docket Number	GHL-P002

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

 Practitioners associated with the Customer Number:

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Name	Registration Number
Keith J. Swedo	43,176

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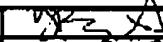
 The address associated with Customer Number:

OR

<input checked="" type="checkbox"/> Firm or Individual Name	Sommer Barnard PC		
Address	One Indiana Square, Suite 3500		
City	Indianapolis	State	Indiana
Country	USA	Zip	46201
Telephone	317-713-3446	Email	ksawedo@sommerbarnard.com

I am the:

 Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

Signature		Date	5-12-06
Name	Joe P. Said	Telephone	(317) 713-3776
Title and Company	Sommer Barnard PC, LLC		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

 Total of 4 forms are submitted.

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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**POWER OF ATTORNEY
Ind
CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number: **PCT/US04/38141**
Filing Date: **Nov. 15, 2004**
First Named Inventor: **Schleppenbach**
Title: **Communication System and Methods**
Art Unit: _____
Examiner Name: _____
Attorney Docket Number: **GHL-P002**

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

Practitioner associated with the Customer Number: _____

OR

Practitioner(s) name below:

	Name	Registration Number
Keith J. Swedo		49,176

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

The address associated with the above-mentioned Customer Number:
OR

The address associated with Customer Number:
OR

<input checked="" type="checkbox"/> Firm or Individual Name:	Sommer Darnard PC		
Address:	One Indiana Square, Suite 3000		
City:	Indianapolis	State:	Indiana
Country:	USA		
Telephone:	317-713-3440	Email:	kevswd@comcast.net

Firm No.

Applicant/Inventor

Assignee of record
Statement under 37 CFR 1.37(b) is enclosed. (Form PTO-893/96)

SIGNATURE of Applicant or Assignee of Record

Signature:

Name:

Title and Capacity:

NOTE: Signatures of all the inventors or their representative(s) are required. Please note that forms other than the one signature is not valid. See below.

Total of **4**

The collection of information in the USPTO is required to obtain or retain a benefit by the public, which is to be used for its own purposes. Confidentiality is guaranteed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes per response, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments to improve this form under suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. FEE TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Application Number	PCT/US04/38141
Filing Date	Nov. 15, 2004
First Named Inventor	Schleppenbach
Title	Communication System and Methods
Art Unit	
Examiner Name	
Attorney Docket Number	GHL - P002

Methods

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

 Practitioners associated with the Customer Number:

OR

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Name	Registration Number
Keith J. Swedo	43,176

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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 The address associated with the above-mentioned Customer Number:

OR

 The address associated with Customer Number:

OR

 Firm or Individual Name: Sommer Bernard PC

Address: One Indiana Square, Suite 3500

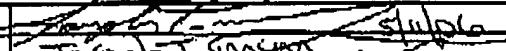
City: Indianapolis State: Indiana Zip: 46204

Country: USA

Telephone: 317-713-3446 Email: kswedo@sommerbernard.com

I am the:

 Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

Signature		Date	5/11/06
Name	Keith J. Swedo	Telephone	(317) 713-3446
Title and Company	President, ghtec		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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